PART B - FEE(S) TRANSMITTAL

Complete and send this form, togethe. 4th applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandra, 2007

or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	form should be used correspondence includi- ed below or directed of tions.	for trans ng the P herwise	mitting the ISSU atent, advance or in Block 1, by (a								
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
T590 10/02/2007 HOVEY WILLIAMS LLP Suite 400 2405 Grand Boulevard						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
Kansas City, MO 64108						(Depositor's name)					
										(Signature)	
					<u> </u>	<u> </u>				(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVEN				RNEY DOCKET NO.	NEY DOCKET NO. CONFIRMATION NO.			
10/658,011 09/09/2003 Olga Koper 26787-C 4040 FITLE OF INVENTION: METHOD FOR BIOLOGICAL AND CHEMICAL CONTAMINATION											
APPLN. TYPE	SMALL ENTITY		UE FEE DUE	PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		E TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	YES	1	\$720	\$300		\$0	\$1020		-	01/02/2008	
EXAMINER		,	ART UNIT	CLASS-SUBCLASS							
JOHNSON, EDWARD M			1754	754 588-401000							
L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assignee recordation as set forth in 37 CFR 3.11. Completion of this form is NO (A) NAME OF ASSIGNEE NanoScale Corporation				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Manhattan, Kansas							
Please check the appropriate. The following fee(s) a Signature fee Publication Fee (N Advance Order - #	Payment of Fec(s): (A check is enclose Payment by credit	ayment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-0522 (enclose an extra copy of this form).									
	us (from status indicated SMALL ENTITY statu 1 Publication Fee (if requestry of the United Sta	is, See 3 uired) w	7 CFR 1.27.	b. Applicant is no	long	er claiming SMAL	L ENT	ITY status. See 37 (CFR 1.27	7(g)(2).	
	1					01/0	2/20	08			
Authorized Signature											
Typed or printed name	Date 48,267 Registration No.										
his collection of informs n application. Confident ubmitting the completed his form and/or suggestion	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this but	FR 1.31 U.S.C. USPTC rden, sho	1. The information 122 and 37 CFR 1 3. Time will vary buld be sent to the	n is required to obtain 1.14. This collection is depending upon the in Chief Information O	or restindivi	etain a benefit by the mated to take 12 n dual case. Any con r, U.S. Patent and	ne publi ninutes mments Tradema	c which is to file (an to complete, include on the amount of t ark Office, U.S. De	nd by the ng gathe ime you partment	USPTO to process) ering, preparing, and require to complete of Commerce, P.O.	

this form and/or suggestions for reducing this burden, should be sent to the Unior Information Officer, U.S. ratent and Trademark Office, U.S. Department of Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.